



Republic of the Philippines
Department of Education
REGION I
SCHOOLS DIVISION OF VIGAN CITY

DIVISION MEMORANDUM

No. 389, s.2025

**CALL FOR NOMINATIONS FOR SINGAPORE COOPERATION
PROGRAMME TRAINING**

TO: Assistant Schools Division Superintendent
Chief Education Supervisors
Public Elementary, Secondary and Integrated School Heads
All Others Concerned

1. In reference to Regional Memorandum No. 810, s. 2025, the Singapore Cooperation Programme (SCP) announces its Call for Nominations for its training program titled Empowering Persons with Disabilities and Special Needs.

2. The course details are as follows:

Course Title	Empowering Persons with Disabilities and Special Needs
Course Schedule	July 17-21, 2025
No. of Slot	One (1)
Modality	Face-to-Face (Singapore)
Target Participants	Mid-level-senior-level government officials involved in social policy planning and development
Deadline of Submission	June 30, 2025

3. School heads are encouraged **to nominate at least one (1) qualified participant**. All nominees must meet the qualifications and submit documentary requirements listed in **Enclosure 1**. The Scholarship Clearance (**Enclosure 2**) should also be submitted.

4. Submit the accomplished Participant Nomination Form and required documents in PDF format to princess.torriger@deped.gov.ph with the subject "SCP Training" **on or before June 30, 2025, at 12:00 noon**.

5. Please note that applications may be disqualified due to various reasons, such as but not limited to, incomplete requirements, lack of official endorsement/s, sending of application directly to the Secretariat's email, and discrepancies in documents, etc.

6. For additional information or any concern, please contact the NEAP Scholarship Secretariat through email scholarships@deped.gov.ph and/or landline (02) 8715-9919.

7. Attached is the Regional Memorandum No. 810, s. 2025 for further reference.

8. Immediate dissemination of this Memorandum is desired.

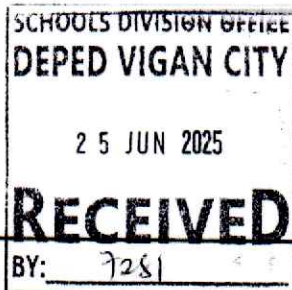
Annie F. Paghles
VILMA D. EDA, CESO V
Schools Division Superintendent



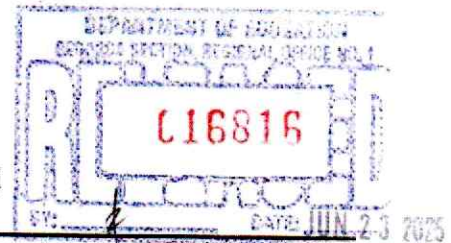
Address: Mena Crisologo St. corner Rivero St., Brgy. IX, Vigan City, Ilocos Sur
Telephone No: (077) 722-20-23 / (077) 632-05-33
Email Address: vigan.city@deped.gov.ph
Website: www.depedvigan.city

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Republic of the Philippines
Department of Education
 REGION I



REGIONAL MEMORANDUM
 No. 910, s. 2025

**CALL FOR NOMINATIONS FOR SINGAPORE COOPERATION PROGRAMME
 TRAINING "EMPOWERING PERSONS WITH DISABILITIES AND SPECIAL
 NEEDS"**

To: Schools Division Superintendents

1. The Singapore Cooperation Programme (SCP) announces its **Call of Nominations** for its training program titled **Empowering Persons with Disabilities and Special Needs**.
2. The course details are as follows:

Course Title	Empowering Persons with Disabilities and Special Needs
Course Schedule	17-21 November 2025
No. of Slots	One (1)
Modality	Face-to-Face (Singapore)
Target Participants	Mid-level-senior-level government officials involved in social policy planning and development
Deadline of Submission	30 June 2025

3. The Schools Division Offices (SDOs) are encouraged to nominate one (1) qualified participant. All nominees must meet the qualifications and submit documentary requirements listed in **Enclosure 1**. The Scholarship Clearance (**Enclosure 2**) should also be submitted.
4. The **Participant Nomination Form and required documents must be accomplished and uploaded (in PDF form) on or before June 30, 2025**, through the Microsoft Office Form which can be accessed through the link <https://forms.office.com/r/uAtTMe4iRE>. Kindly use official DepEd email accounts in submitting the requirements.
5. Please note that applications may be disqualified due to various reasons, such as but not limited to, incomplete requirements, lack of official endorsement/s, sending of requirements directly to the Secretariat's email, discrepancies in documents, etc.
6. NEAP further reiterates that the established qualifications and selection parameters for its scholarship programs are in adherence to the Equal Opportunity Principle (EOP).

7. For additional information or any concern, please contact the **NEAP Scholarship Secretariat** through email scholarships@deped.gov.ph and/or landline (02) 8715-9919.

8. For immediate dissemination and appropriate action.



TOLENTINO G. AQUINO
Director IV

Encl: As stated

Reference: DM-OUHROD-2025-1592

To be indicated in the Perpetual Index

Under the following subjects:

SCHOLARSHIPS

SPECIAL EDUCATION

HRDD/vrdg/RM_SingaporeCooperationProgram
June 23, 2025





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GENERAL ELIGIBILITY REQUIREMENTS/CHECKLIST

Name:	
Scholarship Program:	
Sponsoring Agency/Organization:	
Region/SDO:	
Work Station:	

Remarks (✓, X, others)	Eligibility	Documentary Requirements
	a. Must be a Filipino citizen.	Updated Personal Data Sheet
	b. Must have obtained a very satisfactory (VS) performance rating for two (2) consecutive years.	Latest rated performance rating with approved IDP
	c. Must present his/her Individual Development Plan (IDP) that is validated by the head of the office.	
	d. Must be holding a permanent item.	Updated Service Record
	f. Must have no master's degree (for those who will apply for a master's degree) and shall have no doctoral degree (for those who will apply for a doctoral degree).	Updated Personal Data Sheet
	g. Must have no current or pending enrollment in other institutions for graduate or postgraduate degree programs (for degree programs).	
	h. Must be willing to sign a Scholarship Agreement and consent to its provisions.	(shall be complied with being ultimately nominated)



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	j. Must have no pending administrative, civil, or criminal case, and must have not been found guilty of any violation involving moral turpitude, corruption, or fraud.	Certificate of no pending administrative/legal charges
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ADDITIONAL DOCUMENTARY REQUIREMENT BY TESDA

- Photocopy of VALID Passport
- Diploma/Transcript of Records
- Medical Result (ECG/URINALYSIS/X-RAY/FECCALYSIS) and Medical Certificate that you are physically fit to undergo foreign training.



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SCHOLARSHIP CLEARANCE

I. NAME		
II. Position/Designation		
III. Permanent Station		
IV. Has availed any scholarship program	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, fill out sections V-X, as applicable.
V. Scholarship Program	Program Type	Title of the Program
	<input type="checkbox"/> Degree <input type="checkbox"/> Non-Degree	
VI. Scholarship Duration		
VII. Status	<input type="checkbox"/> Completed the course (Submit a copy of Certificate of Completion)	<input type="checkbox"/> Withdrawn from the Course (State the reason below)



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VIII. Reason/s for Non-Completion (must be supported by attachments)	Resignation <input type="checkbox"/> Transfer <input type="checkbox"/> Retirement <input type="checkbox"/> Others <input type="checkbox"/> <i>Explain further.</i>	
IX. Service Obligation	No. of Months/Yrs Required	No. of Months/Yrs Completed
X. Reason for Non-Completion (must be supported by attachments)	Resignation <input type="checkbox"/> Transfer <input type="checkbox"/> Retirement <input type="checkbox"/> Others <input type="checkbox"/> <i>Explain further.</i>	
I hereby attest that the information in this form and the supporting documents attached hereto are true and correct		
Name and Signature of the Scholar		Date and Time
<i>This is to certify that the information in this form and the supporting documents attached hereto are true and correct</i>		
Name and Signature of the Recommending Authority (SDO - HRDD)		Date and Time
APPROVED		



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Name and Signature of the Recommending Authority

Date and Time

(RO-HRDD)

